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CONFIRMATION NO. 7167

Bib Data Sheet

SERIAL NUMBER 09/692,654	FILING DATE 10/18/2000 RULE	CLASS 455	GROUP ART UNIT 2682	ATTORNEY DOCKET NO. 39389/CAG/B600
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APPLICANTS

Stephen Wu, Los Angeles, CA;
 Brima Ibrahim, Los Angeles, CA;
 Ahmadreza Rofougaran, Marina Del Rey, CA;

**** CONTINUING DATA *******

THIS APPLICATION IS A CON OF 09/634,552 08/08/2000
 WHICH CLAIMS BENEFIT OF 60/160,806 10/21/1999
 AND CLAIMS BENEFIT OF 60/163,487 11/04/1999
 AND CLAIMS BENEFIT OF 60/163,398 11/04/1999
 AND CLAIMS BENEFIT OF 60/164,442 11/09/1999
 AND CLAIMS BENEFIT OF 60/164,194 11/09/1999
 AND CLAIMS BENEFIT OF 60/164,314 11/08/1999 *
 AND CLAIMS BENEFIT OF 60/165,234 11/11/1999
 AND CLAIMS BENEFIT OF 60/165,239 11/11/1999
 AND CLAIMS BENEFIT OF 60/165,356 11/12/1999
 AND CLAIMS BENEFIT OF 60/165,355 11/12/1999
 AND CLAIMS BENEFIT OF 60/172,348 12/16/1999
 AND CLAIMS BENEFIT OF 60/201,335 05/02/2000
 AND CLAIMS BENEFIT OF 60/201,157 05/02/2000
 AND CLAIMS BENEFIT OF 60/201,179 05/02/2000
 AND CLAIMS BENEFIT OF 60/202,997 05/10/2000 *
 AND CLAIMS BENEFIT OF 60/201,330 05/02/2000

(*) Data inconsistent with PTO records.

Yes MM

**** FOREIGN APPLICATIONS *******

No MM

**IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 12/08/2000**

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 48	TOTAL CLAIMS 68	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance				
Verified and Acknowledged	Examiner's Signature <i>MW</i>	Initials <i>MW</i>			

ADDRESS

23363

TITLE

Adaptive radio transceiver with polyphase calibration

FILING FEE RECEIVED 1864	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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